ALLOWANCE HOT LIST

Appl. No. 09/82499 Examiner-TC	Prepared byDate	Mars 1.05.05	
JACKET: VES NO Primary Examiner box cor			
NO Issuing Classification com PTO-892/1449:			
YES NO Examiner's initials or cross YES NO Date(s) supplied/complete	through lines supplied on all PTO-1449/892 sh	for each item cited by heets. (Month and yea	applicant. r required.)
SPEC: (YES) NO Brief Description of Dra YES NO Continuing data is ment	wings includes descript ioned in 1 st paragraph. (tion of each figure in c (Can be an insert.)	lrawings.
		·	
CLAIMS:			day of claims
YES NO Claims listed on Notice of YES NO Claims correctly numbere	d in index.		dex of Claims.
(No duplicate or (No incorrect de	missing claim numbers	s.)	Affection of the second
CRFE: YES NO If necessary (biological	sequence listing).		
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NOTICE OF ALLOWABILITY:

VES NO Either Box No. 3 (drawings accepted) or Box No. 8 (corrected drawing request) has been checked.